## Woodford County APPLICATION FOR ABSENTEE BALLOT

| Applicant's Name  |  |   |  | For Election Authority's Use Only   |  |
|---|--|---|--|---|--|
| Street Address  |  |   | · .  | Log Number:   |  |
| City, State, Zip  |  |   |  | Voter ID:   |  |
| Phone Number*   |  |   | -  | Precinct:   |  |
| To be voted at the  | Consolidated Election  |   |  | Precinct Number –<br>Tax Code   |  |
| Date of Election  | April 9, 2013  |   |  | Ballot Style:   | and the second s |
| *Optional information; even though this is not required, providing it may aid in the processing of your ballot                                |  |   |  |   |  |
| GRACE □   | EARLY ABSENTEE   |   | : 🗆  | NURSING HOME 🗆  |  |
| wish to vote by absented ballot or ballots to the constraint of ballots to the constraint of ballots application and the subsequent election. | application for an official ballo official issuing the same prion midnight preceding election he 14 <sup>th</sup> day following election of at this application is made for the limit of the submit and the same same provided by law pursuant | t or ballots to be voted<br>r to the closing of the<br>day, for counting no la<br>day.<br>an official absentee ba<br>application for an offic | by me polls of the that the that the that the that the the that the the the the the the the the the th | at such election, and I agon the date of the election during the period for conallots to be voted by meentee ballot or ballots to | gree that I shall return such<br>on or, if returned by mail,<br>ounting provisional ballots,<br>at the election specified in<br>o be voted by me at any  |
|   | Signature of Applicant  ddress to which ballot should be mailed: f different from above)   | ,   | -  | Today's   | s Date   |

IMPORTANT:

You must return the completed and signed application to the election authority with jurisdiction over your registration.

Woodford County Clerk 115 N. Main St. Rm. 202 Eureka, IL 61530

Mail To: